TABLE 1-continued

Medical Record of cancer patients.							
PATIENT	CANCER	GENDER/AGE	RACE	UICC STAGE	GLEASONS SCORE	OTHERS	
B07	Breast	Female/54	Caucasian	T2N2M0		hypertension, obesity	
B08	Breast	Female/55	Caucasian	T2NxM0		1-5 cigs/day, wine 200 mL/day	
B09	Breast	Female/83	Caucasian	T4N0M0		Coronary artery disease, cerebral atherosclerosis	
B10	Breast	Female/63	Hispanic	T3N2MX		6-10 cigs/day, hyperthyroid, hypertension, osteoarthritis	
B11	Breast	Female/63	Caucasian	T1NXM0		arterial hypertension	
P01	Prostate	Male/51	Caucasian	T2cNXM0	4 + 3 = 7	•	
P02	Prostate	Male/64	Caucasian	T3bN0MX	3 + 4 = 7		
P03	Prostate	Male/47	Caucasian	T2cN0M0	3 + 3 = 6	hypertension	
P04	Prostate	Male/55	Caucasian	T2bN0M0	3 + 3 = 6	11-20 cigs/day	
P05	Prostate	Male/73	Caucasian	T3aNXMX	4 + 4 = 8	hypertension, 11-20 cigs/day	
P06	Prostate	Male/64	Caucasian	T3N0M0		chronic bronchitis, 11-20 cigs/day	
P07	Prostate	Male/60	Caucasian	T3aN0M0	3 + 4 = 7	gastroesophageal reflux	
P08	Prostate	Male/72	African Am.	T2aNXMX	3 + 3 = 6	1-5 cigs/day	
P09	Prostate	Male/78	Caucasian	T3aN1MX	4 + 3 = 7	hypertension, atrial fibrillation	
P10	Prostate	Male/66	Caucasian	T2aN0MX	3 + 3 = 6	hypertension, 11-20 cigs/day	
P11	Prostate	Male/47	Caucasian	T2cN0M0	3 + 3 = 6	hypertension	
S01	Unknown						
S02	Unknown						

[0221] Many proteins were successfully detected with high signal-to-noise, and the barcode signatures are distinctive among patients. Most assays show a relatively low fluorescence background. However, the assays on P05, P04, P10 and B10 were characterized by a high, interfering background. These high background assays all correlate with patients that were heavy smokers (~11-20 cigs/day); only one serum sample from a heavy smoker did not exhibit a high background (P06). The reason for this high background fluorescence remains unclear. A possible cause is the elevated blood content of the fluorescent carboxyhemoglobin formed in lung. While this identification of smokers constitutes unexpected information from the IBBCs, it also means that, for these patients, some pre-purification of the plasma or serum will be required in order to assay serum protein levels.

[0222] The protein panels used in the cancer-patient serum experiment (panel 1) and finger-prick blood test (panel 2), the corresponding DNA codes, and their sequences are summarized in Tables 2 and 3. These DNA oligomers were synthesized by Integrated DNA Technologies (IDT), and purified by high pressure liquid chromatography (HPLC). The quality was confirmed by mass spectrometry.

TABLE 2

List of protein panels and corresponding DNA codes.							
DNA-code Human Plasma Protein Abbrevi							
Panel (1)							
A/A' B/B'	Interferon-gamma Tumor necrosis factor-alpha	IFN-γ TNF-α					

TABLE 2-continued

List of protein panels and corresponding DNA codes.									
DNA-code	Human Plasma Protein	Abbreviation							
C/C'	C/C' Interleukin-2								
D/D'	Interleukin-1 alpha	IL-1α							
E/E'	Interleukin-1 beta	IL-1β							
F/F'	Transforming growth factor beta	TGF-β							
G/G'	Prostate specific antigen (total)	PSA							
H/H'	Interleukin-6	IL-6							
I/I'	Interleukin-10	IL-10							
J/J'	Interleukin-12	IL-12							
K/K'	GM-CSF								
	stimulating factor								
L/L'	Monocyte chemoattractant protein-1	MCP-1							
M/M'									
Panel (2)									
	`` _								
AA/AA'	Interleukin-1 beta	IL-1β							
BB/BB'	Interleukin-6	IL-6							
CC/CC'	Interleukin-10	IL-10							
DD/DD'	Tumor necrosis factor-alpha	TNF- α							
EE/EE'	Complement Component 3	C3							
FF/FF'	C-reactive protein	CRP							
GG/GG'	GG/GG' Plasminogen								
HH/HH'	PSA								

TABLE 3

	List of DNA	A sequences	used	for s	spatial	encoding	of	antib	odies		
Sequence Name	Sequence)							SEQ I	ID Tm NaCl	(50 m	
A A'		TAA AAA AAA TA AAA AAA						1 2	-	7.9 7.2	